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20/01	່ທ່ ບ່ ປັບnder the Paperwork Reduc	ction Act of 1995, no persons	s are requ	ired to respond	to a collectio	Patent and Tra	demark Office: U	ugh 09/30/00. U.S. Departm	TO/SB/05 (12/97) OMB 0651-0032 tent of Commerce B control number
				Docket No. 33808F151 Total Pages 2					
PATENT APPLICATION				First Name	ed Inventor or	Application Idei	ntifier		
TRANSMITTAL				François COURT et al.					
(Only for ne	ew nonprovisional applications un	nder 37 CFR 1.53(b))	Expres	s Mail Label No	<u>:</u>				
	APPLICATION ELE			ADDRESS	TO: B	ommissioner ox Patent App n, DC 20231			
process Specific Desc Back Brief Claim Abstr S. New Cop (for	ation riptive title of the Invention ground of the Invention Summary of the Invention Description of the Drawings	(if filed) (if filed) (I) (I) (I) (I) (I) (I) (I) (ges 18] eets 1] ges 2] d in h(b) copy ying	7. Nucleot (if appli a.	ACCO signment Formation Department Formation Depart	Amino Acid S necessary) Readable Cop y (identical to verifying ident DMPANYING Papers (cover (b) Statement ttorney slation Docum bisclosure Stat DS Citations mendment ipt Postcard (i Statement(s) filed in prior a	APPLICATION sheet & document (if applicatement (IDS)/if MPEP 503) Simpplication. States	N PARTS ment(s)) s an assign phould be sp	801488/60 nee)
17. If a CON □ Contin	TINUING APPLICATION, cł uation □ Divisional □ C	ontinuation-in-part (Cir)	_ OI	the requisite		n: 			
□ Custome	er Number or Bar Code Labe		-00^{2}	41		ere	or Corre	spondence	address below
Name	SMITH, GAMBRELL & R	USSELL, LLP							
Address	1850 M Street, N.W., Sui	te 800							
City	Washington	State		D.C.		Zip Code		20036	
Country	U.S.	Telephone	(2	02) 659-2811		Fax		(202) 26	3-4329
Name (Print/	Type) Fredeyck F. Dah	tid 1/w			istration N orney/Age		28,557		
Signature			oto Tim-	will yang dangad	ling upon the	Date	June 20, 200	01 y comments o	on the amount of ti

FEE TRANSMITTAL

imail Entity payments must be supported by a small entity statement, otherwise targe entity fees must be paid. See Forms PTO/SB/09-12. See 37 CF R 651 27 and 1 26.

Complete If Known					
Application Number	New				
Filing Date	June 20, 2001				
First Named Inventor	François COURT et al.				
Examiner Name	Unassigned				
Group / Art Unit	Unassigned				
Attorney Docket No.	33808F151				

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any	3. ADDITIONAL FEES			
overpayments to:	Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)			
Deposit Account No.: 02-4300 Deposit Account Name:	105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or cover sheet 139 130 130 Non-English specification 147 2.520 147 2.520 For filing a request for reexamination			
Charge any additional fee Required Under 37 C.F.R. §§1.16 and 1.17 related to this filing Charge the Issue Fee Set in 37 C.F.R. §1.18 at the Mailing of the Notice of Allowance	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
Payment Enclosed: Check □ Money Order □ Other FEE CALCULATION	120 300 220 150 Filing a brief in support of an appeal 121 250 221 130 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding 140 110 240 55 Petition to revive - unavoidable 141 1,210 241 605 Petition to revive - unintentional 1,210 141 1,210 141 1,210 150			
	142 1,210 242 605 Utility issue fee (or reissue) 143 430 243 215 Design issue fee 144 580 244 290 Plant issue fee 122 130 122 130 Petitions to the Commissioner			
Substitute	Petitions related to provisional applications Sbar 40 581 40 581 40 February Submission of Information Disclosure Statement Schmission of Information Disclosure Statement Recording each patent assignment per property (times number of properties) (\$40.00) Filing a submission after final rejection (37 CFR 1.129(a)) For each additional invention to be examined (37 CFR 1.129(b))			
2 TEXTRA CLAIM FEES	SUBTOTAL (3): \$0.00 Reduced by Basic Filing Fee Paid			
Extra Claims Fee from Fee paid below	TOTAL: \$764.00			
Total Claims <u>23</u> -20 = 3 x\$ 18.00= 54.00				
Indep. Claims <u>1 -</u> 3 = 0 x \$80.00 = 0.00				
Multiple Dep. 0 = 0 x \$270.00 = 0.00				
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Typed or	Frederick F. Calvetti		Reg. Number	28,557
Printed Name Signature	Date Date	June 20, 2001	Deposit Account User ID	02-4300

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